

Miss South Jordan's Outstanding Teen Application

FULL NAME (as you wish it listed in program):

DATE OF BIRTH: _____ AGE: _____

ADDRESS:

- () Copy of Birth Certificate
- () Copy of School Transcript/Cumulative Record

FATHER'S NAME: _____

OCCUPATION: _____

MOTHER'S NAME: _____

OCCUPATION: _____

SCHOOL: _____

DESCRIPTION OF EXTRA CIRRCULAR ACTIVITIES, HONORS ETC.:

DESCRIPTION IN DETAIL OF THE TALENT YOU WILL BE PREFORMING AT
THE LOCAL, STATE AND NATIONAL LEVEL:
